

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-213684

Date Filed

1-26-2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer American Municipal Power		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1297 Smithland Dam Rd. Smithland, KY 42081	
3a. Employer Representative - Name and Title Ronald Woodward		3b. Address (if same as 2b - state same) Same	
3c. Tel. No. 1-270-928-3020	3d. Cell No. 1-614-403-8147	3e. Fax No.	3f. E-Mail Address rwoodward@ampppartners.org
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Utility		4b. Principal product or service Hydroelectric Power	
5b. Description of Unit Involved Included: See Attachment Excluded: See Attachment		5a. City and State where unit is located: Smithland, KY	
		6a. No. of Employees in Unit: 8	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) 1/17/18 and Employer declined recognition on or about 1/26/18 (Date) (if no reply received, so state). **No Reply**
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state). None		8b. Address N/A	
8c. Tel No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? NONE
(Name of labor organization) N/A, has picketed the Employer since (Month, Day, Year) N/A.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state)
None

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): 2/20/18	11c. Election Time(s): 6:30am To 7:30am & 6:30pm To 7:30pm	11d. Election Location(s): Employee Break Room located at 1297 Smithland Dam Rd. Smithland, KY 42081
-----------------------------------	---	---

12a. Full Name of Petitioner (including local name and number)
International Brotherhood of Electrical Workers AFL-CIO IBEW Local Union No. 816

12b. Address (street and number, city, state, and ZIP code)
4515 Clarks River Road Paducah, Ky 42003

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Electrical Workers

12d. Tel No. 1-270-898-2456	12e. Cell No. 270-519-3161	12f. Fax No. 1-270-898-2694	12g. E-Mail Address jevans@ibewlocal816.org
--------------------------------	-------------------------------	--------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title
Chad Donathan

13b. Address (street and number, city, state, and ZIP code)
235 Juniper Ct. Mt. Sterling, Ky 40353

13c. Tel No.	13d. Cell No. 1-859-404-8905	13e. Fax No.	13f. E-Mail Address chad_donathan@ibew.org
--------------	---------------------------------	--------------	---

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Chad Donathan	Signature <i>Chad Donathan</i>	Title Lead Organizer	Date 1/26/18
-------------------------------	-----------------------------------	-------------------------	-----------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment:

5b Unit Involved

Included – All full-time and regular part-time employees of the Employer performing work at its facility located at 1297 Smithland Dam Rd. Smithland, KY 42081.

Excluded - Office Clerical employees, Professional employees, Guards and Supervisors as defined in the Act, and all other employees.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No 10-RC-213762	Date Filed 1-29-2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION-RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer CONSOLIDATED NUCLEAR SECURITY		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) 301 BEAR CREEK RD., OAK RIDGE, TN 37831	
3a. Employer Representative - Name and Title CHAD MEE, SR. LABOR RELATIONS MANAGER		3b. Address (If same as 2b - state same) (SAME AS ABOVE)	
3c. Tel. No. 865-574-3554	3d. Cell No.	3e. Fax No. 865-576-9444	3d. E-Mail Address CHAD.MEE@CNS.DOE.GOV
4a. Type of Establishment (Factory, mine, wholesaler, etc.) NATIONAL SECURITY MANUFACTURING PLANT		4b. Principal product or service WEAPONS COMPONENTS	
4c. City and State where unit is located: OAK RIDGE, TN		5a. City and State where unit is located: OAK RIDGE, TN	
5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART - TIME HOURLY EMPLOYEES TO INCLUDE QUALITY - PHYSICAL TESTING TECHNICIANS. Excluded: OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.			5a. No. of Employees in Unit: 17 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about (date) (if no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state). ATOMIC TRADES AND LABOR COUNCIL, AFL-CIO		8b. Address P.O. BOX 4068, OAK RIDGE, TN 37831	
8c. Tel. No. 865-241-3200	8d. Cell No. 865-250-8691	8e. Fax No. 865-574-0482	8f. E-Mail Address MICHAEL.THOMPSON@CNS.DOE.GOV
8g. Affiliation, if any INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO		8h. Date of Recognition or Certification 9/25/1946	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) JUNE 22, 2020			

9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year)

10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) **NONE**

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
10e. Fax No. N/A	10f. E-Mail Address N/A	11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): 02/21/2018		11c. Election Time(s): 4:00 PM - 6:00 PM	
11d. Election Location(s): TRAINING ROOM			

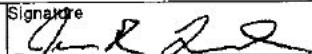
12a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIO	12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO	

12d. Tel. No. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	12g. E-Mail Address
--------------------------------------	---------------	-------------------------------------	---------------------

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@IAMAW.ORG

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

Name (Print) JAMES R. LITTLE	Signature 	Title GRAND LODGE REPRESENTATIVE	DATE 1/29/2018
--	--	--	--------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.	10-RC-215399	Date Filed	2/23/18
----------	--------------	------------	---------

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. **PURPOSE OF THIS PETITION:** RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Daimler Trucks North America LLC	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1800 North Main Street, Mount Holly, NC 28120
--	--

3a. Employer Representative - Name and Title Lynn Thayer, Manager Labor Relations	3b. Address (If same as 2b - state same) Same as 2b
--	--

3c. Tel. No. 704-822-7067	3d. Cell No. 704-360-7691	3e. Fax No.	3f. E-Mail Address lynn.thayer@daimler.com
------------------------------	------------------------------	-------------	---

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Truck assembly	4b. Principal product or service Trucks	5a. City and State where unit is located: Mount Holly, NC
---	--	--

5b. Description of Unit Involved Included: See attachment Excluded: See attachment	6a. No. of Employees in Unit: 4	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
--	------------------------------------	--

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 2/19/18 (Date) (If no reply received, so state).
☒ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None	8b. Address
---	-------------

8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
-------------	-------------	-------------	--------------------

8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
-------------------------	--	---

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. **Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): March 15, 2018	11c. Election Time(s): 1:30pm - 2:30pm	11d. Election Location(s): Training Room, 1800 North Main St., Mount Holly, NC 28120
--	---	---

12a. Full Name of Petitioner (including local name and number) United Auto Workers Local 5285	12b. Address (street and number, city, state, and ZIP code) 113 East Charlotte St., Mount Holly, NC 28120
--	--

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Automobile, Aerospace & Agricultural Implement Workers of America, International Union

12d. Tel No. 704-822-0839	12e. Cell No. 704-941-4590	12f. Fax No. 704-827-7191	12g. E-Mail Address rjgins@uaw.net
------------------------------	-------------------------------	------------------------------	---------------------------------------

13. **Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

13a. Name and Title James D. Fagan, Jr.	13b. Address (street and number, city, state, and ZIP code) Stanford Fagan LLC, 2540 Lakewood Ave SW, Atlanta, GA 30315
13c. Tel No. 404-897-1000	13f. E-Mail Address jfagan@sfglawyers.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) James D. Fagan, Jr.	Signature /s James. D. Fagan Jr.	Title Attorney	Date February 23, 2018
-------------------------------------	-------------------------------------	-------------------	---------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

ATTACHMENT

The Petitioner presently represents employees of Daimler Trucks North America LLC at its Mount Holly, North Carolina facility in the following unit:

Production and Maintenance employees at the Truck Manufacturing Plant and PDI Center located at Mt. Holly, North Carolina, as defined by the National Labor Relations Board, Case No. II-RC-5666 in the Certification of Representative, but excluding all other employees such as but not limited to Supervisors, Professional Employees, Guards, Office Employees, employees whose duties are of a confidential nature, and any excluded employee as defined in the Labor Management Relations Acts of 1947, as amended.

This petition seeks a self-determination election for the presently unrepresented full time and regular part time information technology technicians employed by the Employer at its Mount Holly, North Carolina facility, to be included in the bargaining unit already represented by the Petitioner at the Mt. Holly, North Carolina facility.

FORM NLRB-502 (RC)
(4-15)UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No.	Date Filed
10-RC-216319	03/12/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Walden		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 801 Broadway Nashville, 701 Broadway Nashville, 110 Ninth Avenue South Nashville	
3a. Employer Representative - Name and Title Dick Wong		3b. Address (if same as 2b - state same) 100 East Tenth Street Chattanooga TN 37402	
3c. Tel. No. 423-702-8200	3d. Cell No. 404-304-3006	3e. Fax No. 423-702-8204	3f. E-Mail Address dick.wong@waldensecurity.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Federal Court House		4b. Principal product or service SECURITY	5a. City and State where unit is located: Nashville TN

5b. Description of Unit Involved

Included: all fulltime and part time armed and unarmed security officers employed by the employer

Excluded: clerical, managerial, salaried, and supervisory personnel as defined by the act

6a. No. of Employees in Unit;
266b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) NA and Employer declined recognition on or about NA (Date) (if no reply received, so state). NA
☒ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state). na		8b. Address na	
8c. Tel. No. na	8d. Cell No. na	8e. Fax No. na	8f. E-Mail Address na
8g. Affiliation, if any na		8h. Date of Recognition or Certification NA	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) na

9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA If so, approximately how many employees are participating? NA
(Name of labor organization) NA, has picketed the Employer since (Month, Day, Year) NA

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state)
NA

10a. Name NA	10b. Address NA	10c. Tel. No. NA	10d. Cell No. NA
		10e. Fax No. NA	10f. E-Mail Address NA

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☐ Manual ☒ Mail ☐ Mixed Manual/Mail

11b. Election Date(s): first available


11c. Election Time(s):
NA11d. Election Location(s):
NA12a. Full Name of Petitioner (including local name and number)
United Government Security Officers of America and its Local 17612b. Address (street and number, city, state, and ZIP code)
2879 Cranberry Highway East Wareham, MA 0253812c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Government Security Officers of America International Union

12d. Tel. No. 617-620-7225	12e. Cell No. 617-620-7225	12f. Fax No. NA	12g. E-Mail Address Mleblanc@ugsoa.com
-------------------------------	-------------------------------	--------------------	---

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union		13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538	
13c. Tel. No. 617-620-7225	13d. Cell No. 617-620-7225	13e. Fax No. 774-678-4658	13f. E-Mail Address Mleblanc@ugsoa.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Mike LeBlanc	Signature 	Title DHS Vice President UGSOA International Union	Date 03/12/18
------------------------------	--	---	------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-217195	Date Filed 03/26/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.			
2a. Name of Employer Consolidated Nuclear Security, LLC		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 301 Bear Creek Rd, Oak Ridge, TN 37831-8220	
3a. Employer Representative - Name and Title Chad Mee, Sr. Labor Relations Manager		3b. Address (If same as 2b - state same) SAME AS ABOVE	
3c. Tel. No. (865)574-3554	3d. Cell No.	3e. Fax No. (865)576-9444	3f. E-Mail Address chad.mee@cns.doe.gov
4a. Type of Establishment (Factory, mine, wholesaler, etc.) National Security Manufacturing Plant		4b. Principal product or service Weapons Components	
5a. City and State where unit is located: Oak Ridge, TN			5b. Description of Unit Involved Included: See Attachment A Excluded:
6a. No. of Employees in Unit: 17			6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 3/26/2018 and Employer declined recognition on or about No Reply (Date) (If no reply received, so state).			
<input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state). Atomic Trades and Labor Council, AFL-CIO		8b. Address PO Box 4068, Oak Ridge, TN 37831-4068	
8c. Tel No. (865)241-3200	8d. Cell No. (865)250-8691	8e. Fax No. (865)574-0482	8f. E-Mail Address michael.thompson@cns.doe.gov
8g. Affiliation, if any See Attachment A		8h. Date of Recognition or Certification 09/25/1946	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 06/22/2020

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **NO** If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	11b. Election Date(s): April 9, 2018	11c. Election Time(s): 15:00-18:30	11d. Election Location(s): New Hope Center located at 301 Bear Creek Rd, Oak Ridge, TN 37831-8220
---	--	--	---

12a. Full Name of Petitioner (including local name and number)
Atomic Trades and Labor Council, AFL-CIO

12b. Address (street and number, city, state, and ZIP code)
PO Box 4068, Oak Ridge, TN 37831-4068


12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

12d. Tel No. (330)926-1444	12e. Cell No. (202)394-4561	12f. Fax No. (330)926-0816	12g. E-Mail Address lheasley@icwuc.org
--------------------------------------	---------------------------------------	--------------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Lance Heasley, ICWUC/UFCW Organizer		13b. Address (street and number, city, state, and ZIP code) See Attachment A	
13c. Tel No. SAME AS ABOVE	13d. Cell No. SAME AS ABOVE	13e. Fax No. SAME AS ABOVE	13f. E-Mail Address SAME AS ABOVE

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Lance Heasley	Signature 	Title ICWUC/UFCW Organizer	Date 03/26/2018
--------------------------------------	--	--------------------------------------	---------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment A

5b. Description of Unit Involved

Included: The petitioner presently represents all hourly paid production, maintenance, and service employees at the Y-12 Site, Oak Ridge TN., including Radiological Control Technicians, X-Ray Technicians, equipment dispatchers and receiving and shipping clerks. This petition seeks a self-determination election for the presently unrepresented all full-time and regular part-time Industrial Hygiene Technicians.

Excluded: All other employees, including assay analysts, junior assay analysts, development technicians, glassblowers, laboratory analysts, junior laboratory analysts, property inventory clerks, assistant steam plant engineers, office clerical employees, environmental technology technical specialist, professional employees, guards, and supervisory employees as defined in the act.

8g. Affiliation, if any

Local 252C of the International Chemical Workers Union Council of the United Food & Commercial Workers Union, AFL-CIO, CLC

13b. Address (street and number, city, state, and ZIP code)

PO Box 4154, Oak Ridge, TN 37831-4154

Additional Service to: 1655 West Market Street, 6th Floor, Akron, OH 44313

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-217404

Date Filed

March 29, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Atlanta Gas Light		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 10 Peachtree Place NE GA Atlanta 30309	
3a. Employer Representative - Name and Title Bryan Batson		3b. Address (If same as 2b - state same) 10 Peachtree Place NE GA Atlanta 30309	
3c. Tel. No. (404) 584-4000	3d. Cell No.	3e. Fax No.	3f. E-Mail Address bbatson@southernco.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Utilities		4b. Principal product or service Provide Gas	
4c. City and State where unit is located: Atlanta, GA			

5b. Description of Unit Involved		6a. No. of Employees in Unit: 650
Included: See Attached Page 2 for additional details		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Excluded: See Attached Page 2 for additional details		

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s): April 23, 2018	11c. Election Time(s): 7 AM - 9 AM	11d. Election Location(s): Atlanta
12a. Full Name of Petitioner (including local name and number) James W Flynn International Brotherhood of Electrical Workers		12b. Address (street and number, city, state, and ZIP code) 502 Taylor Trl Mableton GA 30156-3859

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Electrical Workers

12d. Tel No. (601) 590-0698	12e. Cell No. (601) 590-0698	12f. Fax No.	12g. E-Mail Address james_flynn@ibew.org
---------------------------------------	--	---------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title		13b. Address (street and number, city, state, and ZIP code)	
13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) James W Flynn	Signature	Title International Lead Organizer	Date 03/29/2018 09:34:22
--------------------------------------	------------------	--	------------------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

AG General Tech, AMR Tech, AU Tech, General MR Tech, General Tech, Crew Lead, Field Specialist (A, B, C & LM), Field Specialist/Corrosion, Spec Ass. Protection, Spec. Lead Mechanical, Spec. Mechanical, Spec. Pressure Control, Field Tech (AG/BG, General, B & C), Corrosion Tech (I, II & III), Pressure Control Tech (I, II & III), General Tech MR and Utility Tech

Employees Excluded

All Clerical, office employees, security guards, janitoria, grounds keeping and supervisory personnel as defined by the NLRA.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-217463	Date Filed March 30, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Gemstone	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 650 S. Poplar St. Florence, AL 35630
---	--

3a. Employer Representative - Name and Title John Starkey, Plant Manager	3b. Address (If same as 2b - state same) SAME
--	---

3c. Tel. No.	3d. Cell No.	3e. Fax No.	3f. E-Mail Address
---------------------	---------------------	--------------------	---------------------------

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Poultry Debone Plant	4b. Principal product or service Poultry	5a. City and State where unit is located: Florence, AL
--	--	--

5b. Description of Unit Involved Included: Production hourly, maintenance, Quality assurance and shipping. Excluded: Office clerical, management and sanitation	6a. No. of Employees in Unit: 245 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
--	--

Check One: ☒ **7a. Request for recognition as Bargaining Representative was made on (Date) 3/28/18 and Employer declined recognition on or about 3/28/18 (Date) (If no reply received, so state).**
☐ **7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.**

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). Retail, Wholesale Department Store Union	8b. Address 1901 10th Avenue South Birmingham, AL 35205
--	---

8c. Tel No. 205-322-7462	8d. Cell No. 205-420-9309	8e. Fax No. 205-322-8447	8f. E-Mail Address bmurphree@rwdsumidsouth.org
------------------------------------	-------------------------------------	------------------------------------	--

8g. Affiliation, if any None	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
--	---	--

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): 4/16/18	11c. Election Time(s): 7-9 a.m. & 4-6 p.m.	11d. Election Location(s): 650 S. Poplar St. Florence, AL 35630
--	--	---

12a. Full Name of Petitioner (Including local name and number) Retail, Wholesale Department Store Union	12b. Address (street and number, city, state, and ZIP code) 1901 10th Avenue South Birmingham, AL 35205
---	---

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Retail, Wholesale Department Store International Union

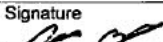
12d. Tel No. 212-684-5300	12e. Cell No.	12f. Fax No. 212-779-2809	12g. E-Mail Address
-------------------------------------	----------------------	-------------------------------------	----------------------------

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Joshua Brewer, Rep	13b. Address (street and number, city, state, and ZIP code) 1901 10th Avenue South Birmingham, AL 35205
--	---

13c. Tel No. 205-322-7462	13d. Cell No. 205-420-9309	13e. Fax No. 205-322-8447	13f. E-Mail Address bmurphree@rwdsumidsouth.org
-------------------------------------	--------------------------------------	-------------------------------------	---

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Joshua Brewer	Signature 	Title Business Representative	Date 3/28/18
--------------------------------------	---	---	------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No	10-RC-217632
Date Filed	04/02/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION - CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.			
2a. Name of Employer CONSOLIDATED NUCLEAR SECURITY		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) 301 BEAR CREEK RD., OAK RIDGE, TN 37831	
3a. Employer Representative - Name and Title CHAD MEE, SR. LABOR RELATIONS MANAGER		3b. Address (If same as 2b - state same) (SAME AS ABOVE)	
3c. Tel. No. 365-574-3554	3d. Cell No.	3e. Fax No. 865-576-9444	3d. E-Mail Address CHAD.MEE@CNS.DOE.GOV
4a. Type of Establishment (Factory, mine, wholesaler, etc.) NATIONAL SECURITY MANUFACTURING		4b. Principal product or service WEAPONS COMPONENTS	
		5a. City and State where unit is located: OAK RIDGE, TN	
5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART TIME HOURLY MATERIAL CONTROLLER TECHNICIANS. Excluded: OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.			6a. No. of Employees in Unit: 21 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on <u> </u> (date) (if no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state). ATOMIC TRADES AND LABOR COUNCIL, AFL-CIO		8b. Address P.O. BOX 4068, OAK RIDGE, TN 37831	
8c. Tel. No. 865-241-3200	8d. Cell No. 865-250-8691	8e. Fax No. 865-574-0482	8f. E-Mail Address MICHAEL.THOMPSON@CNS.DOE.GOV
8g. Affiliation, if any INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO		8h. Date of Recognition or Certification SEPTEMBER 25, 1946	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) JUNE 22, 2020	
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>NO</u> If so, approximately how many employees are participating? <u> </u> (Name of labor organization) <u> </u> , has picketed the Employer since (Month, Day, Year) <u> </u> .			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE			
10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): APRIL 24, 2018	11c. Election Time(s): 4:00 PM - 6:00 PM	11d. Election Location(s): TRAINING ROOM	
12a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIO		12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO			
12d. Tel. No. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title JAMES R. LITTLE, GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@IAMAW.ORG
I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) JAMES R. LITTLE	Signature 	Title GRAND LODGE SPECIAL REPRESENTATIVE	DATE 4/2/2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No 10-RC-218038	Date Filed 4-9-2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION - CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer DEPLOYED RESOURCES (SUB-CONTRACTOR TO ALOG CORPORATION)		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) BUILDING 18558 FORT STEWART, GA 31304	
3a. Employer Representative - Name and Title KEITH SIKES		3b. Address (If same as 2b - state same) 164 MCPIKE ROAD, ROME, NY 13441	
3c. Tel. No. 478-841-2105	3d. Cell No.	3e. Fax No. 315-281-0041	3d. E-Mail Address KSIKES@DEPLOYEDRESOURCES.COM
4a. Type of Establishment (Factory, mine, wholesaler, etc.) LOGISTICS SUPPORT		4b. Principal product or service FIRING RANGE OPERATIONS AND MAINTENANCE	
		5a. City and State where unit is located: FORT STEWART, GA	

5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART TIME LABORERS WORKING AT THE COMPANY'S FACILITY AT FORT STEWART, GA.		6a. No. of Employees in Unit: 2
Excluded: OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about _____ (date) (if no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). NONE		8b. Address N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? N/A. If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	11b. Election Date(s): 05/01/2018	11c. Election Time(s): 5:00 AM - 7:00 AM	11d. Election Location(s): BUILDING 18558 - BREAK ROOM
---	---	--	--

12a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIO		12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO			
12d. Tel. No. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	12g. E-Mail Address

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@IAMAW.ORG

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

Name (Print) JAMES R. LITTLE	Signature 	Title GRAND LODGE REPRESENTATIVE	DATE 04/06/2018
--	---	--	---------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No 10-RC-218096	Date Filed April 9, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION/RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer ALOG CORPORATION (PRIME CONTRACTOR)		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) BUILDING 18558 FORT STEWART, GA 31304	
3a. Employer Representative - Name and Title HEATHER CARANO		3b. Address (If same as 2b - state same) 164 MCPIKE ROAD, ROME, NY 13441	
3c. Tel. No. 256-319-2066	3d. Cell No.	3e. Fax No. 866-301-4390	3d. E-Mail Address HCARANO@ALOGCORP.COM
4a. Type of Establishment (Factory, mine, wholesaler, etc.) LOGISTICS SUPPORT		4b. Principal product or service FIRING RANGE OPERATIONS AND MAINTENANCE	
		5a. City and State where unit is located: FORT STEWART, GA	

5b. Description of Unit Involved
Included:
ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE SUPPLY, LABORS, RCO'S (TOWER OPERATORS) TECHS AND GENERAL MAINTENANCE PERSONNEL WORKING AT THE COMPANY'S FACILITY AT FORT STEWART, GA.

6a. No. of Employees in Unit:
15
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Excluded:
OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.

Check One:
☐ 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about _____ (date) (if no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state). NONE		8b. Address N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A

9. Is there now a strike or picketing at the Employers establishment(s) involved? N/A If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) **NONE**

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.
11a. Election Type:
☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
05/01/2018
11c. Election Time(s):
5:00 AM - 7:00 AM & 1:30 PM - 3:30 PM
11d. Election Location(s):
BUILDING 18558 - BREAK ROOM

12a. Full Name of Petitioner (including local name and number)
IAMAW, AFL-CIO
12b. Address (street and number, city, state, and ZIP code)
690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO

12d. Tel. No. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	12g. E-Mail Address
--------------------------------------	---------------	-------------------------------------	---------------------

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@IAMAW.ORG

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

Name (Print) JAMES R. LITTLE	Signature 	Title GRAND LODGE REPRESENTATIVE	DATE 04/09/2018
--	--	--	---------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-218122	Date Filed 4/10/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer South Carolina Electric and Gas		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 100 Scana Parkway, Cayce, SC 29033	
3a. Employer Representative - Name and Title Ann Davis - Labor Relations		3b. Address (If same as 2b - state same) Same	
3c. Tel. No. 803-217-9287	3d. Cell No. N/A	3e. Fax No. 803-933-8551	3f. E-Mail Address adavis@scana.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Natural gas service provider		4b. Principal product or service Sale, installation, and maintenance of natural gas and natural gas distribution system	5a. City and State where unit is located: See attachment "B"
5b. Description of Unit Involved Included: See attachment "A" Excluded: See attachment "A"			6a. No. of Employees in Unit: Approximately 100 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) **4/10/2018** and Employer declined recognition on or about _____ (Date) (If no reply received, so state). **No reply**
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None		8b. Address N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **No** If so, approximately how many employees are participating? **N/A**
(Name of labor organization) **N/A**, has picketed the Employer since (Month, Day, Year) **N/A**

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.
11a. Election Type: ☐ Manual ☐ Mail ☒ Mixed Manual/Mail

11b. Election Date(s):
Tuesday 5/8/2018 - Thursday 5/10/2018

11c. Election Time(s):
See attachment "C"

11d. Election Location(s):
See attachment "C"

12a. Full Name of Petitioner (including local name and number)
International Brotherhood of Electrical Workers Locals 398 and 772

12b. Address (street and number, city, state, and ZIP code)
(LU398) 107 O'Bannon Court, Summerville, SC 29483 (LU772) 102 Bending Oak Ct. Lexington, SC 29073

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Electrical Workers

12d. Tel. No.
(LU398) 843-709-1967 (LU772) 803-608-2669

12e. Cell No.
same as box 12d Tel No.

12f. Fax No.
None

12g. E-Mail Address
(LU398) comrdcom@aol.com (LU772) fulmer772@aol.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title
David Haynes IBEW Lead Organizer NC/SC

13b. Address (street and number, city, state, and ZIP code)
125 Lonnie Gentry Road, Roxboro, NC 27574

13c. Tel. No.
336-592-5961


13d. Cell No.
336-592-5961

13e. Fax No.
None

13f. E-Mail Address
david_haynes@ibew.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
David Haynes

Signature


Title
IBEW Lead Organizer NC/SC

Date
4/10/2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

ATTACHMENT "A"

Form NLRB-502 (RC)

Box 5b: Description of Unit Involved

The Petitioner seeks a self-determination election in the voting group of employees listed below. The petitioner presently is seeking to represent approximately 100 employees of the employer. The election would determine whether the petitioned for employees desire to be represented by the Petitioner, and thereby to be taken to have indicated their desire to be included in the existing Collective Bargaining Unit of South Carolina Gas and Electric employees currently represented by the International Brotherhood of Electrical Workers, AFL-CIO Local Union 398, pursuant to the Board's decision in *Armour & Co.*, 40 NLRB 1333 (1942) and the *Globe Machine & Stamping Co.*, 3 NLRB 294 (1937).

If a majority of valid ballots are not cast for representation, they will be taken to have indicated the employees' desire to remain unrepresented.

INCLUDED: All gas journeyman and apprentices from the Southern Division, Eastern Division and the Abbeville and Camden Offices of the Central Division

Excluded: All other employees, including office clerical employees, professional employees, janitorial, grounds keeping, guards, and supervisors as defined by the Act.

WITNESSED

WITNESSED

ATTACHMENT "B"

Form NLRB-502 (RC)

Box 5a. City and State where unit is located

South Carolina Electric & Gas (SCE&G)

SCE&G Gas Operations

- **Abbeville District Office** – Abbeville, SC - 8:00am to 5:00pm
- **Beaufort District Office** – Beaufort, SC - 8:00am to 4:30pm
- **Bluffton Office** – Bluffton, SC - 8:00am – 4:30pm
- **Camden District Office** – Camden, SC - 8:00am – 4:30pm
- **Charleston Gas Operations** – Charleston, SC - 8:00am – 4:30pm
- **Cheraw District Office** – Cheraw, SC - 8:00am – 5:00pm
- **Florence District Office** – Florence, SC - 8:00am – 5:00pm
- **Georgetown District Office** – Georgetown, SC - 8:00am – 5:00pm
- **Hampton Business Office** – Hampton, SC - 8:00am – 4:30pm
- **Hartsville Business Office** – Hartsville, SC - 8:00am – 5:00pm
- **Lake City District Office** – Lake City, SC - 8:00am – 5:00pm
- **Marion District Office** – Marion, SC - 8:00am – 5:00pm
- **Myrtle Beach District Office** - Myrtle Beach, SC – 8:00am – 5:00pm
- **Summerville District Office** - Summerville, SC – 8:00am – 4:30pm
- **Sumter Business Office** – Sumter, SC – 8:00am – 5:00pm

ATTACHMENT "C"

Form NLRB-502 (RC)

Box 11c Election Time(s)

SCE&G Gas Operations

- **Abbeville District Office** – Abbeville, SC - 8:00am to 5:00pm (Mail ballot)
- **Beaufort District Office** – Beaufort, SC - 8:00am to 4:30pm
- **Bluffton Office** – Bluffton, SC - 8:00am – 4:30pm
- **Camden District Office** – Camden, SC - 8:00am – 4:30pm
- **Charleston Gas Operations** – Charleston, SC - 8:00am – 4:30pm
- **Cheraw District Office** – Cheraw, SC - 8:00am – 5:00pm
- **Florence District Office** – Florence, SC - 8:00am – 5:00pm
- **Georgetown District Office** – Georgetown, SC - 8:00am – 5:00pm
- **Hampton Business Office** – Hampton, SC - 8:00am – 4:30pm
- **Hartsville Business Office** – Hartsville, SC - 8:00am – 5:00pm
- **Lake City District Office** – Lake City, SC - 8:00am – 5:00pm
- **Marion District Office** – Marion, SC - 8:00am – 5:00pm
- **Myrtle Beach District Office** – Myrtle Beach, SC – 8:00am – 5:00pm
- **Summerville District Office** – Summerville, SC – 8:00am – 4:30pm
- **Sumter Business Office** – Sumter, SC – 8:00am – 5:00pm

Form NLRB-502 (RC)

Box 11d Election Location(s)

SCE&G Gas Operations

- **Abbeville District Office** – Abbeville, SC – Mail ballot
- **Beaufort District Office** – Beaufort, SC - 8:00am to 4:30pm
- **Bluffton Office** – Bluffton, SC - 8:00am – 4:30pm
- **Camden District Office** – Camden, SC - 8:00am – 4:30pm
- **Charleston Gas Operations** – Charleston, SC - 8:00am – 4:30pm
- **Cheraw District Office** – Cheraw, SC - 8:00am – 5:00pm
- **Florence District Office** – Florence, SC - 8:00am – 5:00pm
- **Georgetown District Office** – Georgetown, SC - 8:00am – 5:00pm
- **Hampton Business Office** – Hampton, SC - 8:00am – 4:30pm
- **Hartsville Business Office** – Hartsville, SC - 8:00am – 5:00pm
- **Lake City District Office** – Lake City, SC - 8:00am – 5:00pm
- **Marion District Office** – Marion, SC - 8:00am – 5:00pm
- **Myrtle Beach District Office** – Myrtle Beach, SC – 8:00am – 5:00pm
- **Summerville District Office** – Summerville, SC – 8:00am – 4:30pm
- **Sumter Business Office** – Sumter, SC – 8:00am – 5:00pm

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-218501

Date Filed

April 16, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer
Hormel Foods Corporation

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
3367 Montreal Industrial Way, Tucker, GA 30084

3a. Employer Representative - Name and Title
Robert Guthrie, Human Resources Manager

3b. Address (If same as 2b - state same)
Same

3c. Tel. No.
770-908-4030

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
rguthrie@Hormel.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Food processing

4b. Principal product or service
Food products

5a. City and State where unit is located:
Tucker, GA

5b. Description of Unit Involved

Included: See attachment

Excluded: See attachment

6a. No. of Employees in Unit:
14

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☒ **7a. Request for recognition as Bargaining Representative was made on (Date) 4/16/18 and Employer declined recognition on or about No reply (Date) (If no reply received, so state).**

☐ **7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.**

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).
None

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
May 8, 2018

11c. Election Time(s):
5 AM - 9 AM; 1 PM - 4 PM

11d. Election Location(s):
Conference room

12a. Full Name of Petitioner (including local name and number)
United Food and Commercial Workers, Local 1996

12b. Address (street and number, city, state, and ZIP code)
3302 McGinnis Ferry Rd. Ste 201, Suwanee, GA 30024

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Food and Commercial Workers International Union

12d. Tel No.
678-714-3500

12e. Cell No.

12f. Fax No.
678-714-3501

12g. E-Mail Address
rporras@ufcw1996.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Michael B. Schoenfeld, Attorney

13b. Address (street and number, city, state, and ZIP code)
Stanford Fagan LLC, 2540 Lakewood Ave SW, Atlanta, GA 30315

13c. Tel No.
404-622-0521, ext. 2244

13d. Cell No.
404-402-1220

13e. Fax No.

13f. E-Mail Address
michaels@sfglawyers.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Michael B. Schoenfeld

Signature
s/ Michael B. Schoenfeld

Title
Attorney

Date
April 16, 2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

ATTACHMENT

The Petitioner presently represents employees of Hormel Foods Corporation at its Tucker, Georgia facility in the following unit:

All production and maintenance employees, but excluding office and clerical employees, all inside and outside salesmen, and all supervisory employees with the authority to hire, promote, discharge, discipline, or otherwise effect changes in the status of employees or to effectively recommend such actions.

This petition seeks a self-determination election for the presently unrepresented full time and regular part time Quality Control employees employed by Hormel Foods Corporation at its facility located at 3367 Montreal Industrial Way, Tucker, GA 30084, to be included in the bargaining unit already represented by the Petitioner at the Tucker, Georgia facility.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-218970

Date Filed

04/24/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer

Durham School Services, Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)

2501 Dodds Ave
TN Chattanooga 37407-1299

3a. Employer Representative - Name and Title

Greg Johnson

3b. Address (If same as 2b - state same)

3c. Tel. No.

(423) 209-5680

3d. Cell No.

3e. Fax No.

(423) 209-5681

3f. E-Mail Address

gjohnson@durhamschoolservices.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

Transportation

4b. Principal product or service

transport students

5a. City and State where unit is located:

Chattanooga, TN

5b. Description of Unit Involved

Included: See Attached Page 2 for additional details

Excluded: See Attached Page 2 for additional details

6a. No. of Employees in Unit:

265

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No _____ If so, approximately how many employees are participating? _____

(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
May 11, 2018

11c. Election Time(s):
8am-11:30am, 12:30pm-2pm, 3:30pm-6pm

11d. Election Location(s):
Service Center, Tyner, Hixson (all 3 facilities)

12a. Full Name of Petitioner (including local name and number)

Joe Bennett
Teamsters Local 327

12b. Address (street and number, city, state, and ZIP code)

1178 Antioch Pike
TN Nashville 37211-3102

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Teamsters

12d. Tel No.

(615) 781-1630

12e. Cell No.

(615) 573-0782

12f. Fax No.

(615) 781-1658

12g. E-Mail Address

jbennett327@comcast.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title

Samuel Morris Attorney
Teamsters Local 327

13b. Address (street and number, city, state, and ZIP code)

50 N Front St Ste 800
TN Memphis 38103-2181

13c. Tel No.

(901) 528-1702

13d. Cell No.

(901) 483-0838

13e. Fax No.

(901) 528-0246

13f. E-Mail Address

smorris@gmlblaw.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

Samuel Morris

Signature

Samuel Morris

Title

Attorney

Date

04/24/2018 11:03:45

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case 10-RC-218970	Date Filed 04/24/2018

Employees Included

All regular full time and regular part time drivers and aides/monitors

Employees Excluded

All supervisors, managers, dispatchers, clerical, mechanics, lot techs and casuals

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-219365

Date Filed

May 1, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer First Transit		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 610 8th Street South AL Birmingham 35233-	
3a. Employer Representative - Name and Title Vera Matthews		3b. Address (If same as 2b - state same) 610 8th Street South AL Birmingham 35233-	
3c. Tel. No. (205) 934-3514	3d. Cell No.	3e. Fax No.	3f. E-Mail Address Vera.Matthews@firstgroup.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transportation		4b. Principal product or service Transit Service	
4c. City and State where unit is located: Birmingham, AL			

5b. Description of Unit Involved		6a. No. of Employees in Unit: 35
Included: See Attached Page 2 for additional details		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Excluded: See Attached Page 2 for additional details		

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): June 1, 2018	11c. Election Time(s): 5:00 AM to 7:00 AM, 11:30 AM to 2:30 PM, 5:00 PM	11d. Election Location(s): Drivers' Break Room
12a. Full Name of Petitioner (including local name and number) Gregory Roddy Amalgamated Transit Union Local 725		12b. Address (street and number, city, state, and ZIP code) 2112 12th Ave N AL Birmingham 35234-2720

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Amalgamated Transit Union

12d. Tel No. (205) 591-8999	12e. Cell No. (407) 625-3242	12f. Fax No. (205) 591-4633	12g. E-Mail Address groddi@brighthouse.com
---------------------------------------	--	---------------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Daniel B. Smith Assistant General Counsel AMALGAMATED TRANSIT UNION		13b. Address (street and number, city, state, and ZIP code) 10000 New Hampshire Ave MD Silver Spring 20903-1790	
13c. Tel No. (301) 431-7100	13d. Cell No. (202) 714-4219	13e. Fax No. (301) 431-7116	13f. E-Mail Address dsmith@atu.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Daniel B. Smith	Signature Daniel B. Smith	Title Assistant General Counsel	Date 05/1/2018 11:50:18
--	-------------------------------------	---	-----------------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All full-time and regular part-time operators, dispatchers, road supervisors, mechanics, fuelers, and lot coordinators/attendants employed by the Employer at and out of its Birmingham facility.

Employees Excluded

All other employees, office clerical employees, and guards, professional employees and supervisors as defined in the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-219864	Date Filed 5/8/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer <i>The Crow & Quill</i>		2b. Address(es) of Establishment(s) Involved (Street and number, city, state, ZIP code) <i>106 N. Lexington Ave. Asheville NC 28801</i>	
3a. Employer Representative - Name and Title <i>Casper Campbell</i>		3b. Address (if same as 2b - state same) <i>Same</i>	
3c. Tel. No. <i>(386) 847-9478</i>	3d. Cell No. <i>(386) 847-9478</i>	3e. Fax No.	3f. E-Mail Address <i>Crowandquill@gmail.com</i>
4a. Type of Establishment (Factory, mine, wholesaler, etc.) <i>Bar</i>	4b. Principal product or service <i>Cocktail Service</i>	5a. City and State where unit is located: <i>Asheville NC</i>	
5b. Description of Unit Involved Included: <i>All non-management staff</i> Excluded:		6a. No. of Employees in Unit: <i>7</i> 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ (If no reply received, so state).
☒ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state).		8b. Address	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any <i>None</i>		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? *NO* If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): <i>TBD</i>	11c. Election Time(s): <i>TBD</i>	11d. Election Location(s): <i>TBD</i>	

12a. Full Name of Petitioner (including local name and number) <i>Service Workers in Solidarity</i>	12b. Address (street and number, city, state, and ZIP code) <i>(b) (6), (b) (7)(C)</i>
--	---

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent.
None

12d. Cell No. <i>(b) (6), (b) (7)(C)</i>	12e. Fax No.	12f. E-Mail Address <i>(b) (6), (b) (7)(C)</i>
---	--------------	---

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.
(b) (6), (b) (7)(C)

13a. Address (street and number, city, state, and ZIP code) <i>(b) (6), (b) (7)(C)</i>	13b. Cell No.	13c. Fax No.
---	---------------	--------------

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

<i>(b) (6), (b) (7)(C)</i>	Title <i>(b) (6), (b) (7)</i>	Date 3/8/2018
----------------------------	----------------------------------	------------------

WILLFUL FALSE STATEMENT (b) (6), (b) (7)(C)

CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-220145	Date Filed 05/14/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Duck River Electric Membership Corporation		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1411 Madison Street, Shelbyville, TN 37160	
3a. Employer Representative - Name and Title Michael Watson, President & Chief Executive Officer		3b. Address (If same as 2b - state same) Same	
3c. Tel. No. 931-684-4621	3d. Cell No. N/A	3e. Fax No. 931-909-1287	3f. E-Mail Address mwatson@dremc.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Public Utility		4b. Principal product or service Electric Power Provider	
5b. Description of Unit Involved Included: All lineman, apprentice lineman, senior lineman, working foreman, senior working foreman, engineering aide and field engineers at the employer's District Offices in Columbia, Decherd, Lewisburg, Manchester, Sewanee, Shelbyville, Chapel Hill, and Lynchburg Tennessee Facilities Excluded: All other employees, including office clerical employees, professional employees, janitorial, grounds keeping, guards and supervisors as defined by the ACT.		5a. City and State where unit is located: Shelbyville, TN 6a. No. of Employees in Unit: Approximately 65 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) **5/14/2018** and Employer declined recognition on or about **not received** (Date) (If no reply received, so state). **No reply**
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None		8b. Address N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **No** If so, approximately how many employees are participating? **N/A**
(Name of labor organization) **N/A**, has picketed the Employer since (Month, Day, Year) **N/A**.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.
11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
Monday 6/4/2018
11c. Election Time(s):
7:30 a.m. to 9:00 a.m.
11d. Election Location(s):
See attachment "A"

12a. Full Name of Petitioner (including local name and number)
International Brotherhood of Electrical Workers Local 429
12b. Address (street and number, city, state, and ZIP code)
2001 Elm Hill Pike, Nashville, TN 37210

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Electrical Workers

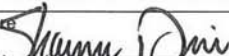
12d. Tel. No. 615-889-4429	12e. Cell No. 615-419-2430	12f. Fax No. 615-874-1253	12g. E-Mail Address sdavis@ibew429.org
--------------------------------------	--------------------------------------	-------------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title **Shannon Davis, Assistant Business Manager**
13b. Address (street and number, city, state, and ZIP code)
2001 Elm Hill Pike, Nashville, TN 37210

13c. Tel. No. 615-889-4429	13d. Cell No. 615-419-2430	13e. Fax No. 615-874-1253	13f. E-Mail Address sdavis@ibew429.org
--------------------------------------	--------------------------------------	-------------------------------------	--

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Shannon Davis	Signature 	Title Assistant Business Manager	Date 5/14/2018
--------------------------------------	--	--	--------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment "A"

Form NLRB-502 (RC)

Box 11C Election Time(s)

Duck River Electric Membership Corporation

- Lewisburg District Office (Meeting Room) – Lewisburg, TN – 7:30am to 9:00am on 6/4/2018
- Shelbyville District Office (Auditorium) – Shelbyville, TN – 7:30am to 9:00am on 6/4/2018
- Manchester District Office (Auditorium) – Manchester, TN – 7:30am to 9:00am on 6/4/2018

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-220197

Date Filed

May 15, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer FreightCar America Inc.		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1200 Haley Drive, Cherokee, Alabama 35616-5369	
3a. Employer Representative - Name and Title Rodney Atkins, Human Resources Manager		3b. Address (If same as 2b - state same) SAME	
3c. Tel. No. 256-370-5500	3d. Cell No.	3e. Fax No.	3f. E-Mail Address ratkins@freightcar.net
4a. Type of Establishment (Factory, mine, wholesaler, etc.) FACTORY		4b. Principal product or service Production of Railroad Freight Cars	
5b. Description of Unit Involved Included: All FreightCar America Hourly Employees including Maintenance and Quality Assurance (QA). Also, all hourly Temp Service Employees Excluded: All Salaried Employees, Supervisors, Office and Clerical, Security/Guards		5a. City and State where unit is located: Cherokee, Alabama	
		6a. No. of Employees in Unit:	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). NONE		8b. Address	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
NONE

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): June 6, 2018	11c. Election Time(s): 1:00 pm — 5:00 pm CST	11d. Election Location(s): North and South Break Rooms
---	--	--

12a. Full Name of Petitioner (including local name and number)
International Association of Sheet Metal Air Rail Transportation Workers (SMART)

12b. Address (street and number, city, state, and ZIP code)
8882 Red Creek Drive S, Semmes, Alabama 36575-4474


12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
NONE

12d. Tel. No. 251-752-2616	12e. Cell No. 251-752-2616	12f. Fax No.	12g. E-Mail Address tfisher@smart-union.org
--------------------------------------	--------------------------------------	---------------------	---

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Thomas Eugene Fisher		13b. Address (street and number, city, state, and ZIP code) 8882 Red Creek Drive S, Semmes, Alabama 36587-5474	
13c. Tel. No. 251-752-2616	13d. Cell No. 251-752-2616	13e. Fax No.	13f. E-Mail Address tfisher@smart-union.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Thomas Eugene Fisher	Signature 	Title SMART International Representative	Date May 15, 2018
---	---	--	-----------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-220689	Date Filed 5-22-18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Coilplus		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 426 Chimney Rock Rd., Greensboro, NC 27409	
3a. Employer Representative - Name and Title Anthony Burton, Plant President		3b. Address (If same as 2b - state same) Same	
3c. Tel. No. (336) 533-1308 ext. 208	3d. Cell No. (336) 312-1575	3e. Fax No. (336) 299-9882	3f. E-Mail Address Aburton@coilplus.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) factory/warehouse		4b. Principal product or service produce steel product and steel coil inventory	
5a. City and State where unit is located: Greensboro, NC		5b. Description of Unit Involved Included: All full-time and regular part-time production and maintenance employees at the Employer's facility in Greensboro, NC Excluded: All temporary employees, office clerical and professional employees, guards, and supervisors as defined in the Act	
6a. No. of Employees in Unit: Approximately 45		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) by petition and Employer declined recognition on or about no reply (Date) (If no reply received, so state).	<input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.
--	---

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **No** If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
none

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	11b. Election Date(s): 6/15/18	11c. Election Time(s): 5 - 7 a.m. and 2 -3:30 p.m.	11d. Election Location(s): main break room
---	--	--	--

12a. Full Name of Petitioner (including local name and number) United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied & Industrial Service Workers International Union, AFL-CIO, CLC	12b. Address (street and number, city, state, and ZIP code) 60 Boulevard of the Allies, Five Gateway Center Room 913Pittsburgh, PA 15222
---	--

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied & Industrial Service Workers International Union, AFL-CIO, CLC

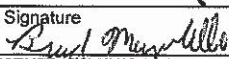
12d. Tel No. (412) 562-2529	12e. Cell No. (412) 418-4333	12f. Fax No. (412) 562-2555	12g. E-Mail Address bmanzollilo@usw.org
---------------------------------------	--	---------------------------------------	---

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Brad Manzollilo, USW Organizing Counsel	13b. Address (street and number, city, state, and ZIP code) 60 Boulevard of the Allies, Five Gateway Center Room 913Pittsburgh, PA 15222
---	--

13c. Tel No. (412) 562-2529	13d. Cell No. (412) 418-4333	13e. Fax No. (412) 562-2555	13f. E-Mail Address bmanzollilo@usw.org
---------------------------------------	--	---------------------------------------	---

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Brad Manzollilo	Signature 	Title Organizing Counsel	Date 5/22/18
--	--	------------------------------------	------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-221571

Date Filed

06/07/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer

J T Thorpe & Sons Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)

238 W 2nd St
KY Maysville 41056-

3a. Employer Representative - Name and Title

Vernon Decker

3b. Address (If same as 2b - state same)

238 W 2nd St
KY Maysville 41056-

3c. Tel. No.

(606) 564-3773

3d. Cell No.

(606) 407-1350

3e. Fax No.

3f. E-Mail Address

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

Construction Services

4b. Principal product or service

Refractory

5a. City and State where unit is located:

Hawesville, KY

5b. Description of Unit Involved

Included: See Attached Page 2 for additional details

Excluded: See Attached Page 2 for additional details

6a. No. of Employees in Unit:

5

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No _____ If so, approximately how many employees are participating? _____

(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
6/19/2018

11c. Election Time(s):
Noon

11d. Election Location(s):
Lewistown, KY.

12a. Full Name of Petitioner (including local name and number)

Lonnie Calvert
LIUNA Local 1392

12b. Address (street and number, city, state, and ZIP code)

9700 Lower River Rd.
KY Louisville 40272-3719

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Kentucky

12d. Tel No.

(615) 618-4539

12e. Cell No.

12f. Fax No.

(502) 995-3725

12g. E-Mail Address

lcalvert@ovssr.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title

13b. Address (street and number, city, state, and ZIP code)

13c. Tel No.

13d. Cell No.

13e. Fax No.

13f. E-Mail Address

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

Signature

Lonnie D. Calvert

Title

Date

06/6/2018 15:05:19

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case 10-RC-221571	Date Filed 06/07/2018

Employees Included

All laborers that perform general labor and tending of masons

Employees Excluded

Masons, supervisors, and management

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-221944

Date Filed

6/13/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Dodson Pest Control		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 425 Ann Street Fayetteville, NC 28301	
3a. Employer Representative - Name and Title: Clyde Odom-Manager		3b. Address (if same as 2b - state same): Same	
3c. Tel. No. 844 501 5083	3d. Cell No. 910-764-6062	3e. Fax No. 910 678 0639	3f. E-Mail Address manager_24@dodsonbrothers.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.): Pest Control Company		4b. Principal Product or Service: Pest Control Service	
5a. City and State where unit is located: Fayetteville, NC 28301		5b. Description of Unit Involved: Included: All Commission pest control technicians & All Commission outside sales representative. Excluded: All Termite technicians, clerical employees, All Supervisors, managers & guards as defined by act	
6a. Number of Employees in Unit: 8		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7a. Request for recognition as Bargaining Representative was made on (Date) 6-13-2018 (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.		Employer declined recognition No	
8a. Name of Recognized or Certified Bargaining Agent (If none, so state): UFCW Local 204 AFLCIO/CLC		8b. Address: P.O. Box 347 Clemmons, NC 27012	
8c. Tel. No. 336-918-0940	8d. Cell No.	8e. Fax No. 336-893-8901	8f. E-Mail Address ufcwkenedy@gmail.com
8g. Affiliation, if any: UFCW U, AFLCIO/CLC		8h. Date of Recognition or Certification	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)			
9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? _____ (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: June 28, 2018 Employer's Fayetteville office		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): June 28, 2018	11c. Election Time(s): 7am-10am	11d. Election Location(s): Training Room	
12a. Full Name of Petitioner (including local name and number): UFCW Local 204 AFLCIO/CLC		12b. Address (street and number, city, State and ZIP code): P.O. Box 347 Clemmons, NC 27012	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): United Food & Commercial Worker's International Union AFLCIO/CLC			
12d. Tel. No. 336 918-0940	12e. Cell No.	12f. Fax No. 336-893-8901	12g. E-Mail Address ufcwkenedy@gmail.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: David Kennedy - Secretary of Treas.		13b. Address (street and number, city, State and ZIP code): P.O. Box 347 Clemmons, NC 27012	
13c. Tel. No. 336-918-0940	13d. Cell No.	13e. Fax No. 336-893-8901	13f. E-Mail Address ufcwkenedy@gmail.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Steven MARRS	Signature [Signature]	Title International Representative	Date 6/13

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) **6-13-2018**
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC)
(4-15)UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-222088

Date Filed

6-15-2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer ADC LTD NM		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 784 Highway 74 S Peachtree city Georgia 30269	
3a. Employer Representative - Name and Title Phillip Cordova		3b. Address (if same as 2b - state same) 2100 Air Park RD SE, Suite 120 Albuquerque, NM 87106	
3c. Tel. No. 505-265-5800	3d. Cell No. 505-259-6877	3e. Fax No. 505-503-7720	3f. E-Mail Address Pcordova@adcltdnm.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) FAA		4b. Principal product or service Security	5a. City and State where unit is located: Peachtree GA

5b. Description of Unit Involved

Included: all fulltime and part time armed and unarmed security officers employed by the employer

Excluded: clerical, managerial, salaried, and supervisory personnel as defined by the act

6a. No. of Employees in Unit:
8

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) NA and Employer declined recognition on or about NA (Date) (If no reply received, so state). NA

☒ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state). NA		8b. Address NA	
8c. Tel No. NA	8d. Cell No. NA	8e. Fax No. NA	8f. E-Mail Address NA
8g. Affiliation, if any NA		8h. Date of Recognition or Certification NA	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) NA

9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA If so, approximately how many employees are participating? NA

(Name of labor organization) NA has picketed the Employer since (Month, Day, Year) NA

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
NA

10a. Name NA	10b. Address NA	10c. Tel. No. NA	10d. Cell No. NA
		10e. Fax No. NA	10f. E-Mail Address NA

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
first available

11c. Election Time(s):
0500-0700, 1300-1500

11d. Election Location(s):
work site, or a location near work site

12a. Full Name of Petitioner (including local name and number)
United Government Security Officers of America and Its Local 297

12b. Address (street and number, city, state, and ZIP code)
2879 Cranberry Highway East Wareham, MA 02538

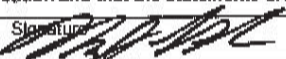
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Government Security Officers of America International Union

12d. Tel No. 617-620-7225	12e. Cell No. 617-620-7225	12f. Fax No. NA	12g. E-Mail Address Mleblanc@ugsoa.com
------------------------------	-------------------------------	--------------------	---

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union		13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538	
13c. Tel No. 617-620-7225	13d. Cell No. 617-620-7225	13e. Fax No. NA	13f. E-Mail Address Mleblanc@ugsoa.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Mike LeBlanc	Signature 	Title DHS Vice President UGSOA International Union	Date 06/15/18
------------------------------	--	---	------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-222904

Date Filed

June 28, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer MacLean Power Systems		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1909 Highway 87, Alabaster, AL 35007	
3a. Employer Representative - Name and Title Lisa Glander, HR Manager		3b. Address (If same as 2b - state same) SAME AS ABOVE	
3c. Tel. No. 205-685-5447	3d. Cell No. 847-417-0235	3e. Fax No.	3f. E-Mail Address lglander@macleanpower.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) foundry		4b. Principal product or service electrical components	5a. City and State where unit is located: Alabaster, AL
5b. Description of Unit Involved Included: All full-time and regular part-time production and maintenance employees Excluded: All office clerical employees, professional employees, guards, and supervisors defined in the Act.			6a. No. of Employees in Unit: 89 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? ☒ No If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None

10a. Name None	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): July 17, 2018
11c. Election Time(s): 4:00-6:00 pm
11d. Election Location(s): employee break room

12a. Full Name of Petitioner (including local name and number) United Steelworkers	12b. Address (street and number, city, state, and ZIP code) 1909 Highway 87, Alabaster, AL 35007
---	---

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Steelworkers

12d. Tel No. 205-631-0137	12e. Cell No. 205-276-6849 (League) 205-602-3282 (Smith)	12f. Fax No. 205-	12g. E-Mail Address rleague@usw.org msmith@usw.org
------------------------------	--	----------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Raymond League, International Staff Representative Michael Smith, International Sub-District Director		13b. Address (street and number, city, state, and ZIP code) SAME AS ABOVE	
13c. Tel No. SAME AS ABOVE	13d. Cell No. SAME AS ABOVE	13e. Fax No. SAME AS ABOVE	13f. E-Mail Address SAME AS ABOVE

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Raymond League	Signature	Title International Staff Representative	Date
--------------------------------	-----------	---	------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

1-2280196373

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

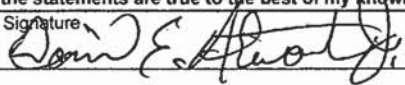
10-RC-223394

Date Filed

7/10/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Electronic Metrology Laboratory, LLC		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): See attached page.	
3a. Employer Representative - Name and Title: Mike Courter		3b. Address (if same as 2b - state same): 318 Seaboard Lane, Suite 106 Franklin, TN 37067	
3c. Tel. No. 270-348-0546	3d. Cell No. 270-348-0546	3e. Fax No. 615-771-2551	3f. E-Mail Address mike.courter@eml1.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Government Contractor		4b. Principal Product or Service Facilities Services	5a. City and State where unit is located: Asheville and Winston Salem, NC
5b. Description of Unit Involved: Included: All Full time and other employees- Chief Engineer, Lead Maintenance Mechanic, Maintenance Mechanic Excluded: Guards, Supervisors and Managers as defined in the Act			6a. Number of Employees in Unit: Asheville (4) Winston Salem (3) 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 7/10/18 and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state)		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of Labor Organization) , has picketed the Employer since (Month, Day, Year)			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election:		11a. Election Type: <input type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): 7/18/18, 7/19/18 or 7/23/18 thru 7/26/18	11c. Election Time(s): 5:30pm	11d. Election Location(s): Asheville and Winston Salem sites	
12a. Full Name of Petitioner (including local name and number): International Union of Operating Engineers IUOE Local 465		12b. Address (street and number, city, State and ZIP code): P.O. Box 15250 Durham, NC 27704	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Union of Operating Engineers			
12d. Tel. No. 919-596-6869	12e. Cell No. 919-943-7103	12f. Fax No. 919-882-1626	12g. E-Mail Address iuoe465@frontier.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: David Atwater - Business Manager/President		13b. Address (street and number, city, State and ZIP code): P.O. 15250 Durham, NC 27704	
13c. Tel. No. 919-596-6869	13d. Cell No. 919-943-7103	13e. Fax No. 919-882-1626	13f. E-Mail Address iuoe465@frontier.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) David Atwater	Signature 	Title Business Manager/President	Date 7/10/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

2b. Addresses:

1. Veach Baley Federal Building
151 Patton Ave.
Asheville, NC 28801
2. Federal Building/Courthouse
100 Otis Street
Asheville, NC 28801
3. Hiram H. Ward Federal Building/Courthouse
251 North Main St.
Winston-Salem, NC 27101

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-223530

Date Filed

07/11/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer:
Hollander Sleep Products

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
660 National Turnpike
Munfordville, KY 42765

3a. Employer Representative - Name and Title:
Michelle Eisner

3b. Address (if same as 2b - state same):
Same

3c. Tel. No.
270-524-1509

3d. Cell No.
270-524-5211

3e. Fax No.
270-524-1518

3f. E-Mail Address

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Factory

4b. Principal Product or Service
Mattress Pads, Sleep Products

5a. City and State where unit is located:
Munfordville, KY

5b. Description of Unit Involved:

Included:

All hourly, non-management areas, classifications, and positions

Excluded:

All salaried and managerial positions; other positions excluded by the NLRA

6a. Number of Employees in Unit:
220

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? ☒ Yes ☐ No

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 7-10-18 and Employer declined recognition on or about (Date) No Reply (If no reply received, so state).

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state)

8b. Address:

8c. Tel. No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any:

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? 0
(Name of Labor Organization) -, has picketed the Employer since (Month, Day, Year) -.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election:

11a. Election Type:

☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):

7-26-18

11c. Election Time(s):

1-5pm

11d. Election Location(s):

Employer facility at 660 National Turnpike

12a. Full Name of Petitioner (including local name and number):

General Drivers and Warehousemen, Teamsters Local 89

12b. Address (street and number, city, State and ZIP code):

3813 Taylor Blvd
Louisville, KY 40215

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):

International Brotherhood of Teamsters

12d. Tel. No.

502-368-5885

12e. Cell No.

502-439-0997

12f. Fax No.

502-366-2009

12g. E-Mail Address

jdennis@teamsters89.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title:

Jay Dennis

Assistant to the President/Organizing Director

13b. Address (street and number, city, State and ZIP code):

3813 Taylor Blvd
Louisville, KY

13c. Tel. No.

502-368-5885 ext. 133

13d. Cell No.

502-439-0997

13e. Fax No.

502-366-2009

13f. E-Mail Address

jdennis@teamsters89.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

Jay Dennis

Signature



Title

Assistant to the President

Date

7-11-18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-223992	Date Filed July 19, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer Core Civic		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 146 CCA Road Lumpkin, GA 31815	
3a. Employer Representative - Name and Title Jeff Rainey - Managing Director-Employee Relations		3b. Address (If same as 2b - state same) 10 Burton Hills Boulevard, Nashville, TN 37215	
3c. Tel. No. 615-263-3000	3d. Cell No.	3e. Fax No. 615-263-3140	3f. E-Mail Address jeff.rainey@corecivic.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SECURITY AGENCY		4b. Principal product or service SECURITY	
		5a. City and State where unit is located: Lumpkin, GA	

5b. Description of Unit Involved
Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED DETENTION OFFICERS, CORRECTIONS OFFICERS, TRANSPORTATION OFFICERS AND BAILIFFS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, EMPLOYED BY CORE CIVIC @ 146 CCA ROAD, LUMPKIN, GA 31815.
Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT.

6a. No. of Employees in Unit: 300
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state). **NONE**
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). NONE		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **NO** If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
NONE

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. **Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): 8/9/18
11c. Election Time(s): Mail
11d. Election Location(s): Mail

12a. **Full Name of Petitioner (including local name and number)**
International Union, Security, Police and Fire Professionals of America (SPFPA)

12b. **Address (street and number, city, state, and ZIP code)**
25510 Kelly Road, Roseville, MI 48066

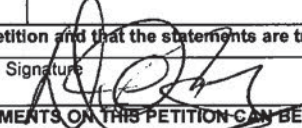
12c. **Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**
International Union, Security, Police and Fire Professionals of America (SPFPA)

12d. Tel No. 586-772-7250 X111	12e. Cell No. 586-872-5634	12f. Fax No. 586-772-9644	12g. E-Mail Address organize@spfpa.org
--	--------------------------------------	-------------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Gordon Gregory, General Counsel		13b. Address (street and number, city, state, and ZIP code) 65 Cadillac Square, Suite 3727, Detroit, MI 48226	
13c. Tel No. 313-964-5600	13d. Cell No.	13e. Fax No. 313-964-2125	13f. E-Mail Address Gordon@UnionLaw.net

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) David L. Hickey	Signature 	Title International President	Date 7/18/18
--	--	---	------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC)
(4-15)UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-226013

Date Filed

August 21, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer

NATIONAL SECURITY ASSOCIATES, INC.

2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code)

960 RIVERBEND RD., CUSSETA, GA 31805

3a. Employer Representative - Name and Title
RAY REID - DIRECTOR OF MILITARY & LAW
ENFORCEMENT TRAINING3b. Address (if same as 2b - state same)
(SAME AS ABOVE)

3c. Tel. No.

706-329-8279

3d. Cell No.

3e. Fax No.

3d. E-Mail Address

RAYREID@TEAMNSA.COM

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

MULTIPLE INTEGRATED LASER ENGAGEMENT SYSTEM

4b. Principal product or service:

MILITARY TRAINING

5a. City and State where unit is located:

CUSSETA, GA

5b. Description of Unit Involved

Included:

ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE 1-ET1 (ELECTRONICS TECH I)
2-ET2 (ELECTRONICS TECH II) AND 3-ET3 (ELECTRONICS TECH III)

Excluded:

OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS,
AS DEFINED IN THE ACT.

6a. No. of Employees in Unit:

6

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One:

☐ 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about _____ (date) (if no reply received, so state).

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state).

NONE

8b. Address

N/A

8c. Tel. No.

N/A

8d. Cell No.

N/A

8e. Fax No.

N/A

8f. E-Mail Address

N/A

8g. Affiliation, if any

N/A

8h. Date of Recognition or Certification

N/A

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

N/A

9. Is there now a strike or picketing at the Employer's establishment(s) involved? N/A If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE

10a. Name

N/A

10b. Address

N/A

10c. Tel. No.

N/A

10d. Cell No.

N/A

10e. Fax No.

N/A

10f. E-Mail Address

N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type:

☒

Manual

☐

Mail

☐

Mixed Manual/Mail

11b. Election Date(s):

9/12/2018

11c. Election Time(s):

4:00 PM ~ 5:30 PM

11d. Election Location(s):

HAMPTON INN SOUTH-FORT BENNING, 2870 S.
LUMPKIN RD., COLUMBIA, GA 31903 (CONFERENCE ROOM)

12a. Full Name of Petitioner (including local name and number)

IAMAW, AFL-CIO

12b. Address (street and number, city, state, and ZIP code)

690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO

12d. Tel. No.

817-505-0100

12e. Cell No.

12f. Fax No.

817-459-0107

12g. E-Mail Address

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title

JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE

13b. Address (street and number, city, state, and ZIP code)

690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011

13c. Tel. No.

817-505-0100

13d. Cell No.

682-401-7835

13e. Fax No.

817-459-0107

13d. E-Mail Address

JLITTLE@IAMAW.ORG

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

JAMES R. LITTLE

Signature



Title

GRAND LODGE REPRESENTATIVE

DATE

8/21/2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 4942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

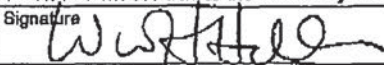
UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
10-RC-226135Date Filed
Aug. 22, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Haeco Americas		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 5568 Gumtree Road, Winston Salem, NC 27107 8010 Piedmont Triad Parkway, Greensboro, NC 27409	
3a. Employer Representative - Name and Title: Andy Halsey, Chief Human Resources Officer		3b. Address (if same as 2b - state same): 5568 Gumtree Road, Winston Salem, NC 27107	
3c. Tel. No. 336-464-0122	3d. Cell No.	3e. Fax No.	3f. E-Mail Address ANDY.HALSEY@HAECO.AERO
4a. Type of Establishment (Factory, mine, wholesaler, etc.) factory		4b. Principal Product or Service aircraft seat & interiors manuf.	5a. City and State where unit is located: Winston-Salem & Greensboro, NC
5b. Description of Unit Involved: Included: all production and maintenance employees Excluded: managers, supervisors, professionals, office clericals, and guards			6a. Number of Employees in Unit 170 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) n/a and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No <input checked="" type="checkbox"/> If so, approximately how many employees are participating? (Name of Labor Organization) has picketed the Employer since (Month, Day, Year)			
10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None			
10a. Name		10b. Address	10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: 11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): Wednesday, September 12		11c. Election Time(s): 5-7AM and 2-4PM 11d. Election Location(s): break rooms at each location	
12a. Full Name of Petitioner (including local name and number): Int'l Assoc. of Machinists and Aerospace Workers		12b. Address (street and number, city, State and ZIP code): 9000 Machinists Place, Upper Marlboro, MD 20772	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Association of Machinists and Aerospace Workers			
12d. Tel. No. (301) 967-4510	12e. Cell No.	12f. Fax No. (301) 967-4594	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: William H. Haller, Associate General Counsel		13b. Address (street and number, city, State and ZIP code): 9000 Machinists Place, Upper Marlboro, MD 20772	
13c. Tel. No. (301) 967-4510	13d. Cell No.	13e. Fax No. (301) 967-4594	13f. E-Mail Address whaller@iamaw.org
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) William H. Haller		Signature 	Title Associate General Counsel Date 8/22/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-226505

Date Filed

8/30/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer

Buffalo Air Handling

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)

467 Zane Snead Dr
VA Amherst 24521-4383

3a. Employer Representative - Name and Title

Ted Krueger

3b. Address (If same as 2b - state same)

467 Zane Snead Dr
VA Amherst 24521-4383

3c. Tel. No.

(434) 946-7455

3d. Cell No.

3e. Fax No.

(434) 946-0226

3f. E-Mail Address

tkrueger@buffaloair.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

Misc. Fabricated Products

4b. Principal product or service

HVAC Air Handling Units

5a. City and State where unit is located:

Amherst, VA

5b. Description of Unit Involved

Included: See Attached Page 2 for additional details

Excluded: See Attached Page 2 for additional details

6a. No. of Employees in Unit:

80

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One:



7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).



7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____

(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
ASAP

11c. Election Time(s):
ASAP

11d. Election Location(s):
Company Facilities (Breakroom)

12a. Full Name of Petitioner (including local name and number)
Charles Kenneth Sewell
Charles K. Sewell Sheet Metal Air Rail and Transportation Workers (SMART) LOCAL 100

12b. Address (street and number, city, state, and ZIP code)
4725 Silver Hill Rd
MD Suitland 210746-2400

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Sheet Metal Air Rail and Transportation Workers (SMART)

12d. Tel No.
(800) 492-8004

12e. Cell No.
(443) 794-9359

12f. Fax No.
(301) 967-1683

12g. E-Mail Address
cs Sewell@smart100.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title

13b. Address (street and number, city, state, and ZIP code)

13c. Tel No.

13d. Cell No.

13e. Fax No.

13f. E-Mail Address

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

Charles Kenneth Sewell

Signature

Charles K. Sewell

Title

Business Representative

Date

08/27/2018 10:47:53

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case 10-RC-226505	Date Filed 8/30/18

Employees Included

Any and all buffalo employees, Including Temp Agency workers, who manufacture, assemble and service Buffalo Air Handling Products

Employees Excluded

Any and all office staff, excluding all subcontractors, (Southern Air and CRB Electric Inc.)

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-227236

Date Filed

September 12, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Georgia Windstream, LLC		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2000 Communications Blvd GA Baldwin 30511-1762	
3a. Employer Representative - Name and Title Jarrod Berkshire		3b. Address (If same as 2b - state same) 2000 Communications Blvd GA Baldwin 30511-1762	
3c. Tel. No. (706) 776-4275	3d. Cell No.	3e. Fax No. (330) 487-2763	3f. E-Mail Address jberkshire@windstream.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Communications Services		4b. Principal product or service Telecommunications	
5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details		5a. City and State where unit is located: Baldwin, GA	
		6a. No. of Employees in Unit: 400	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): September 26, 2018	11c. Election Time(s): 10:00	11d. Election Location(s): Harris Tower, 233 Peachtree Street, NE, Atlanta, GA 30303
12a. Full Name of Petitioner (including local name and number) Nick Hawkins Communications Workers of America, AFL-CIO, CLC		12b. Address (street and number, city, state, and ZIP code) 3516 Covington Hwy GA Decatur 30032-1894

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Communications Workers of America, AFL-CIO, CLC

12d. Tel No. (404) 296-5553	12e. Cell No.	12f. Fax No.	12g. E-Mail Address nhawkins@cwa-union.org
---------------------------------------	----------------------	---------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Robert M Weaver Attorney Quinn, Connor LLP		13b. Address (street and number, city, state, and ZIP code) 3516 Covington Highway GA Decatur 30032	
13c. Tel No. (404) 299-1211	13d. Cell No.	13e. Fax No. (404) 299-1288	13f. E-Mail Address rweaver@qcwdr.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Robert M Weaver	Signature Robert M Weaver	Title Attorney	Date 09/12/2018 13:30:02
--	-------------------------------------	--------------------------	------------------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All Technicians employed in the State of Georgia, including employees in the Customer Service Technician, Business System Technician, and Network Technician job classifications as of the date of the filing of this petition

Employees Excluded

All other employees employed in the State of Georgia, including employees in the Customer Service Representative, Assigner, Retail Sales Consultant, Customer Care Specialist, and Business Care Specialist job classifications as of the date of the filing of this petition, and also excluding Professional Employees, Engineers, Supervisors, all Clerical Employees and Guards

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-227890

Date Filed

September 24, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Luxottica Retail		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 100 Greenwood Industrial Parkway, McDonough, GA 30253	
3a. Employer Representative - Name and Title Lisa Shelton, Senior Manager		3b. Address (If same as 2b - state same) Same	
3c. Tel. No. 770-305-7400	3d. Cell No.	3e. Fax No.	3f. E-Mail Address lshelton@luxotticaretail.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Factory and Warehouse		4b. Principal product or service design, manufacture and distribution of eyewear	
5b. Description of Unit Involved Included: All full-time & regular part-time production, lab, maintenance, warehouse, retail, shipping and receiving and quality assurance employees, group leaders & team lead employees employed at the McDonough, GA facilities. Excluded: All temporary, salaried, office clerical, & professional employees, contractors, guards and supervisors defined by the act.		5a. City and State where unit is located: McDonough, GA 6a. No. of Employees in Unit: 800 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) **9-21-2018** and Employer declined recognition on or about _____ (Date) (If no reply received, so state). **No**
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None		8b. Address	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **No** If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name None	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s): Thursday, Oct 4th and Friday, Oct. 5, 2018	11c. Election Time(s): 10/4: 5:30 am - 11am, 2 pm - 7 pm; 10/5: 5:30 am - 11 am, 3 pm - 8 pm.	11d. Election Location(s): Conference Room Building 1, Room ASC2-201 Building 2, NAS - Conference Room
---	---	--

12a. Full Name of Petitioner (including local name and number) Retail, Wholesale & Department Store Union/UFCW Southeast Council	12b. Address (street and number, city, state, and ZIP code) 1838 Metropolitan Pkwy, SW, Atlanta, GA 30315
--	---

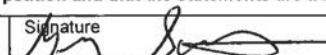
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Retail, Wholesale & Department Store Union/United Food & Commercial Workers

12d. Tel No. 404-758-0865	12e. Cell No. 678-507-6636	12f. Fax No. 404-758-5628	12g. E-Mail Address rwdsusec@aol.com
-------------------------------------	--------------------------------------	-------------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Greg Scandrett, Union Representative		13b. Address (street and number, city, state, and ZIP code) 1838 Metropolitan Pkwy, SW, Atlanta, GA 30315	
13c. Tel No. 404-758-0865	13d. Cell No. 678-507-6636	13e. Fax No. 404-758-5628	13f. E-Mail Address rwdsusec@aol.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Greg Scandrett	Signature 	Title Union Representative	Date
---------------------------------------	--	--------------------------------------	------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
10-RC-228129

Date Filed
September 26, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer
DHL Supply Chain

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
4475 S. Fulton Pkwy, Building 5, Atlanta, GA 30349

3a. Employer Representative - Name and Title
Katrina McClellan, Human Resource Manager

3b. Address (If same as 2b - state same)
Same

3c. Tel. No.
404-684-3400

3d. Cell No.
470-625-2344

3e. Fax No.

3f. E-Mail Address

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Warehouse

4b. Principal product or service
Logistics

5a. City and State where unit is located:
Atlanta, GA

5b. Description of Unit Involved
Included: All full-time & part-time warehouse, production, forklift operators, shipping, receiving, maintenance, leads, inventory control, cycle counters, and quality control employees employed at the Atlanta, GA facility
Excluded: All temporary, salaried, office clerical, & professional employees, contractors, guards and supervisors defined by the act.

6a. No. of Employees in Unit:
75

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) **09-26-2018** and Employer declined recognition on or about _____ (Date) (If no reply received, so state).

☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).
None

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **No** If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

None

10e. Fax No.

10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
Tuesday, October 9, 2018

11c. Election Time(s):
2:00 pm to 6:00 pm

11d. Election Location(s):
Conference Room located in facility

12a. Full Name of Petitioner (Including local name and number)
Retail, Wholesale & Department Store Union/UFCW Southeast Council

12b. Address (street and number, city, state, and ZIP code)
1838 Metropolitan Pkwy, SW, Atlanta, GA 30315

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Retail, Wholesale & Department Store Union/United Food & Commercial Workers

12d. Tel No.
404-758-0865

12e. Cell No.
678-507-6636

12f. Fax No.
404-758-5628

12g. E-Mail Address
rwdsusec@aol.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title
Greg Scandrett, Union Representative

13b. Address (street and number, city, state, and ZIP code)
1838 Metropolitan Pkwy, SW, Atlanta, GA 30315

13c. Tel No.
404-758-0865

13d. Cell No.
678-507-6636

13e. Fax No.
404-758-5628

13f. E-Mail Address
rwdsusec@aol.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Greg Scandrett

Signature


Title
Union Representative

Date
9/26/2018

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 10-RC-228544 Date Filed 10-2-18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. **PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Taher, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 109 T.W. Alexander Drive Durham, NC 27709	
3a. Employer Representative - Name and Title: Bruce Taher, President & CEO		3b. Address (if same as 2b - state same): 5570 Smetana Drive Minnetonka, Minnesota 55943	
3c. Tel. No. 952-945-0505	3d. Cell No.	3e. Fax No. 952-945-0444	3f. E-Mail Address
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Food Service Contractor		4b. Principal Product or Service Food Services	5a. City and State where unit is located: Research Triangle Park, NC
5b. Description of Unit Involved: Included: All non-supervisory food service employees of the Employer at the address in 2b Excluded: All supervisory employees and all guards.			6a. Number of Employees in Unit: 9 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) <u>N/A</u> and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state) None		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>No</u> If so, approximately how many employees are participating? (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) None			
10a. Name		10b. Address	10c. Tel. No.
			10d. Cell No.
			10e. Fax No.
			10f. E-Mail Address
11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: Election should be held as soon as possible.			11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s):		11c. Election Time(s): <u>2:30pm - 4:30pm</u>	11d. Election Location(s): 109 T.W. Alexander Dr., Durham, NC
12a. Full Name of Petitioner (including local name and number): Industrial Technical & Professional Employees Union, OPEIU Local 4873, AFL-CIO		12b. Address (street and number, city, State and ZIP code): P.O. Box 370 Spring Lake, NC 28390	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Office & Professional Employees International Union			
12d. Tel. No. 910-497-1661	12e. Cell No.	12f. Fax No. 910-497-1674	12g. E-Mail Address denise.moore@itpeu.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Sidney H. Kalban, Union Counsel		13b. Address (street and number, city, State and ZIP code): 80 8th Avenue, Suite 1806 New York, N.Y. 10011	
13c. Tel. No. 212-868-5867	13d. Cell No.	13e. Fax No. 212-868-5869	13f. E-Mail Address itpeulaw@gmail.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Denise Moore		Signature <u>Denise Moore</u>	Title ITPEU Representative
			Date 09/26/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

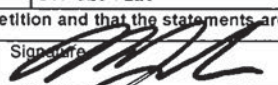
Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will not release this information to the public. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-228586	Date Filed October 3, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Centerra /Ahtna		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 7 Frankford Ave Anniston AL 36201	
3a. Employer Representative - Name and Title Pinkey Morris /NA		3b. Address (If same as 2b - state same) 7121 Fairway Drive Suite 301 Palm Beach Gardens FL 33418 / 110 West 38th Ave Suite 100 Anchorage Alaska 99503	
3c. Tel. No. 561-472-0600 /907-868-8250	3d. Cell No. NA /NA	3e. Fax No. 561-472-3679 /907-868-8285	3f. E-Mail Address gerard.neville@triplecanopy.com /NA
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Fort McClellan Army Depot		4b. Principal product or service Security	
5b. Description of Unit Involved Included: all fulltime and part time armed and unarmed security officers employed by the employer Excluded: clerical, managerial, salaried, and supervisory personel as defined by the act		5a. City and State where unit is located: Anniston AL	
6a. No. of Employees in Unit: 45		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) <u>NA</u> and Employer declined recognition on or about <u>NA</u> (Date) (If no reply received, so state). <u>NA</u> <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state). NA		8b. Address NA	
8c. Tel. No. NA	8d. Cell No. NA	8e. Fax No. NA	8f. E-Mail Address NA
8g. Affiliation, if any NA		8h. Date of Recognition or Certification NA	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) NA			
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>NA</u> If so, approximately how many employees are participating? <u>NA</u> (Name of labor organization) <u>NA</u> , has picketed the Employer since (Month, Day, Year) <u>NA</u>			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NA			
10a. Name NA		10b. Address NA	
10c. Tel. No. NA		10d. Cell No. NA	
10e. Fax No. NA		10f. E-Mail Address NA	
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): first available		11c. Election Time(s): 0500-0700, 1300-1500	
11d. Election Location(s): Worksite			
12a. Full Name of Petitioner (including local name and number) United Government Security Officers of America and its Local 299		12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Government Security Officers of America International Union			
12d. Tel. No. 617-620-7225	12e. Cell No. 617-620-7225	12f. Fax No. NA	12g. E-Mail Address Mleblanc@ugsoa.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union		13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538	
13c. Tel. No. 617-620-7225	13d. Cell No. 617-620-7225	13e. Fax No. NA	13f. E-Mail Address Mleblanc@ugsoa.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Mike LeBlanc	Signature 	Title DHS Vice President UGSOA International Union	Date 10/02/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC)
(2-18)UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

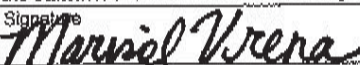
10-RC-229692

Date Filed

Oct. 22, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Stresscrete, Inc.		2b. Address(es) of Establishment(s) Involved (Street and number, City, State, ZIP code): 9200 Energy Lane Northport, AL 35476	
3a. Employer Representative - Name and Title: Ken Johnson		3b. Address (if same as 2b - state same): Same	
3c. Tel. No. 2053390711	3d. Cell No.	3e. Fax No. 2053394840	3f. E-Mail Address Sales@stresscrete2.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Warehouse		4b. Principal Product or Service Concrete poles	5a. City and State where unit is located: Northport, AL
5b. Description of Unit Involved: Included: Full-time and part-time Caging, Pouring, Finishing, Setup, Crane operator, Yard man, Hookup, Welding Excluded: Office, Clerical and Management		6a. Number of Employees in Unit: 39 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 10-22-18 and Employer declined recognition on or about (Date) 10-22-18 (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state) Retail, Wholesale and Department Store Union		8b. Address: 1901 10th Avenue South Birmingham, AL 35205	
8c. Tel. No. 2053227462	8d. Cell No. 2054827237	8e. Fax No. 2053228447	8f. E-Mail Address bmurphree@rwdsumidsouth.org
8g. Affiliation, if any: None		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of Labor Organization) , has picketed the Employer since (Month, Day, Year)			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in Item 5b above. (If none, so state)			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election:			11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): 11/12/18	11c. Election Time(s): 5:00-8:00 am & 2:00-5:00 pm		11d. Election Location(s): 9200 Energy Lane Northport, AL 35476
12a. Full Name of Petitioner (including local name and number): Retail, Wholesale and Department Store Union		12b. Address (street and number, city, State and ZIP code): 1901 10th Avenue South Birmingham, AL 35205	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (If none, so state): Retail, Wholesale and Department Store Union International			
12d. Tel. No. 2126845300	12e. Cell No.	12f. Fax No. 2127782600	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Marisol Urena, RWDSU Representative		13b. Address (street and number, city, State and ZIP code): 1901 10th Avenue South Birmingham, AL 35205	
13c. Tel. No. 2053227462	13d. Cell No. 2054827237	13e. Fax No. 2053228447	13f. E-Mail Address bmurphree@rwdsumidsouth.org
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Marisol Urena	Signature 		Title RWDSU Representative
			Date 10/22/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. **10-RC-229737**

Date Filed **October 23, 2018**

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Paragon Systems, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) various U.S. Government facilities throughout North Carolina	
3a. Employer Representative - Name and Title Laura Hagan - VP/General Counsel		3b. Address (If same as 2b - state same) 13655 Dulles Technology Drive, Suite 100, Herndon, VA 20171	
3c. Tel. No. 865-266-0383	3d. Cell No.	3e. Fax No. 703-579-1576	3f. E-Mail Address lhagan@parasys.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SECURITY AGENCY		4b. Principal product or service SECURITY	5a. City and State where unit is located: statewide locations in North Carolina

5b. Description of Unit Involved

Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED SECURITY OFFICERS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, EMPLOYED BY PARAGON SYSTEMS, INC @ VARIOUS U.S. GOVERNMENT FACILITIES THROUGHOUT THE STATE OF NORTH CAROLINA UNDER CONTRACT HSHQE4-12-D-00006 WITH THE DEPARTMENT OF HOMELAND SECURITY AND FEDERAL PROTECTIVE SERVICE

Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT.

6a. No. of Employees in Unit: 147
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) (If no reply received, so state).
☒ **NO** (Date) (If no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). The Protection & Response Officers of America Inc.		8b. Address 1870 The Exchange, Suite 100, Atlanta, GA 30339	
8c. Tel No. 888-889-7762	8d. Cell No.	8e. Fax No. 404-759-2078	8f. E-Mail Address admin@proaunion.org
8g. Affiliation, if any		8h. Date of Recognition or Certification unknown	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 12/31/2019

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **NO** If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
NONE

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. **Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): 11/12/18
11c. Election Time(s): MAIL
11d. Election Location(s): MAIL

12a. Full Name of Petitioner (including local name and number)
International Union, Security, Police and Fire Professionals of America (SPFPA)

12b. Address (street and number, city, state, and ZIP code)
25510 Kelly Road, Roseville, MI 48066

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Union, Security, Police and Fire Professionals of America (SPFPA)

12d. Tel No. 586-772-7250 X111	12e. Cell No. 586-872-5634	12f. Fax No. 586-772-9644	12g. E-Mail Address organize@spfpa.org
-----------------------------------	-------------------------------	------------------------------	---

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Gordon Gregory, General Counsel		13b. Address (street and number, city, state, and ZIP code) 65 Cadillac Square, Suite 3727, Detroit, MI 48226	
13c. Tel No. 313-964-5600	13d. Cell No.	13e. Fax No. 313-964-2125	13f. E-Mail Address Gordon@UnionLaw.net

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) David L. Hickey	Signature 	Title International President	Date 10/22/18
---------------------------------	---------------	----------------------------------	------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-230018	Date Filed 10/29/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Duke Energy		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 9550 Research Drive Charlotte, NC 28262	
3a. Employer Representative - Name and Title Jay Alvaro Vice-President Human Resources		3b. Address (If same as 2b - state same) 139 East Fourth Street Cincinnati, Ohio 45202	
3c. Tel. No. 513-287-2649	3d. Cell No. 513-287-2649	3e. Fax No.	3f. E-Mail Address jay.alvaro@duke-energy.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Energy Control Center		4b. Principal product or service Energy Transmission	
5a. City and State where unit is located: Charlotte, NC		6a. No. of Employees in Unit: 42	
5b. Description of Unit Involved Included: All full-time Associate System Operators; System Operators I, System Operators II, Senior System Operators and Lead System Operators reporting to Managers Daniel Stevens and John Lyerly. Excluded: All guards and supervisory personnel as defined in the NLRA.		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) **10/29/18** and Employer declined recognition on or about **not recieved** (Date) (If no reply received, so state). no reply
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). N/A		8b. Address N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **No** If so, approximately how many employees are participating? **N/A**
(Name of labor organization) **N/A**, has picketed the Employer since (Month, Day, Year) **N/A**

10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in Item 5b above. (If none, so state)
none

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.
11a. Election Type: ☐ Manual ☒ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
Mail Ballot See Attachment "A"

11c. Election Time(s):
Mail Ballot See Attachment "A"

11d. Election Location(s):
Mail Ballot See Attachment "A"

12a. Full Name of Petitioner (Including local name and number)
International Brotherhood of Electrical Workers Local 962

12b. Address (street and number, city, state, and ZIP code)
325 West J.J. Drive (Suite 110) Greensboro, NC 27406

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Electrical Workers "AFL-CIO"

12d. Tel. No.
202-833-7000

12e. Cell No.
336-448-8491

12f. Fax No.
336-448-8491

12g. E-Mail Address
keith_rivers@ibew.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.
13a. Name and Title
Keith Rivers IBEW LO NC/SC

13b. Address (street and number, city, state, and ZIP code)
1056 W Bank St Winston Salem, NC 27101

13c. Tel. No.
336-448-8491

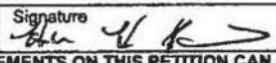
13d. Cell No.
336-448-8491

13e. Fax No.

13f. E-Mail Address
keith_rivers@ibew.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Keith Rivers

Signature


Title
IBEW Lead Organizer NC/SC

Date
10/29/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment "A"

Form NLRB-502 (RC)

Box 11C Election Time(s)

Duke Energy Control Center Operators

Petitioner believes the mail ballot option would be the least disruptive form of election for all parties involved. The System Operators unit consist of (2) groups of workers totaling approximately (43) employees. The proposed unit is made up of three-man crews working separate 12 hour "rotating" shifts (6am - 6pm & 6pm - 6am) seven days a week.

Because of these schedules, it would be extremely difficult if not impossible for the Board to conduct onsite elections in a manner that would be cost efficient for the Board and allow the majority of the employees to vote onsite before during or after their normally scheduled work day.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION


DO NOT WRITE IN THIS SPACE	
Case No 10-RC-230484	Date Filed 11/05/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer RUAG SPACE USA		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) 100 ATLAS AVENUE, TRINITY, AL 35673	
3a. Employer Representative - Name and Title DAVID ROWE - GENERAL MANAGER		3b. Address (If same as 2b - state same) 1101 MCMURTRIE DRIVE NW, STE D2, HUNTSVILLE, AL 35806	
3c. Tel. No. 256-947-2504	3d. Cell No.	3e. Fax No.	3d. E-Mail Address DAVID.ROWE@RUAG.COM
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SIMULATORS		4b. Principal product or service C130J FLIGHT SIMULATION	
5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE: PRODUCTION TECH, PRDUCTION LEAD, QUALITY TECHS, MATERIAL HANDLER, AND ADMINISTRATIVE SUPPORT SPECIALIST. Excluded: OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.		5a. City and State where unit is located: TRINITY, AL	
6a. No. of Employees in Unit: 23		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on <u>Petition will serve as request for recognition</u> and Employer declined recognition on or about _____ (date) (if no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state). NONE		8b. Address N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A	
9. Is there now a strike or picketing at the Employers establishment(s) involved? <u>N/A</u> If so, approximately how many employees are participating? _____ (Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____			
10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state) <u>NONE</u>			
10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): NOVEMBER 29, 2018	11c. Election Time(s): 11:30 PM - 12:30 PM	11d. Election Location(s): PAINT BOOTH	
12a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIO		12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO			
12d. Tel. No. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@IAMAW.ORG

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

Name (Print) JAMES R. LITTLE	Signature 	Title GRAND LODGE REPRESENTATIVE	DATE 11/05/2018
--	---	--	---------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC)
(4-15)UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITIONDO NOT WRITE IN THIS SPACE
Case No. **10-RC-230519** Date Filed **November 6, 2018**

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer
Centerra /Ahtna

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
7 Frankford Ave Anniston AL 36201

3a. Employer Representative - Name and Title
Pinkey Morris /NA

3b. Address (if same as 2b - state same)
7121 Fairway Drive Suite 301 Palm Beach Gardens FL 33419 / 110 West 28th Ave Suite 100 Anchorage Alaska 99503

3c. Tel. No.
561-472-0600 /907-868-8250

3d. Cell No.
NA /NA

3e. Fax No.
561-472-3679 /907-868-8285

3f. E-Mail Address
gerard.neville@triplecanopy.com /NA

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Fort McClellan Army Depot

4b. Principal product or service
Security

5a. City and State where unit is located:
Anniston AL

5b. Description of Unit Involved

Included: all full time and part time armed and unarmed alarm monitors, alarm monitor leads, and security guard leads

Excluded: clerical, managerial, salaried, and supervisory personnel as defined by the act

6a. No. of Employees in Unit:

10

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One:

☐

7a. Request for recognition as Bargaining Representative was made on (Date) **NA** and Employer declined recognition on or about (Date) (If no reply received, so state) **NA**

☐

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state).

NA

8b. Address

NA

8c. Tel. No.

NA

8d. Cell No.

NA

8e. Fax No.

NA

8f. E-Mail Address

NA

8g. Affiliation, if any

NA

8h. Date of Recognition or Certification

NA

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

NA

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **NA** If so, approximately how many employees are participating? **NA**

(Name of labor organization) **NA**, has picketed the Employer since (Month, Day, Year) **NA**

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state)

NA

10a. Name

NA

10b. Address

NA

10c. Tel. No.

NA

10d. Cell No.

NA

10e. Fax No.

NA

10f. E-Mail Address

NA

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s): first available

11c. Election Time(s):

0500-0700, 1300-1500

11d. Election Location(s):

Worksite

12a. Full Name of Petitioner (including local name and number)

United Government Security Officers of America and its Local 299

12b. Address (street and number, city, state, and ZIP code)

2579 Cranberry Highway East Wareham, MA 02538

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

United Government Security Officers of America International Union

12d. Tel. No.

617-620-7225

12e. Cell No.

617-620-7225

12f. Fax No.

NA

12g. E-Mail Address

Mieblanc@ugsoa.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title **Mike LeBlanc DHS Vice President UGSOA International Union**

13b. Address (street and number, city, state, and ZIP code)

2579 Cranberry Highway East Wareham, MA 02538

13c. Tel. No.

617-620-7225

13d. Cell No.

617-620-7225

13e. Fax No.

NA

13f. E-Mail Address

Mieblanc@ugsoa.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)

Mike LeBlanc

Signature



Title

DHS Vice President UGSOA International Union

Date

11/06/18

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-230716	Date Filed November 8, 2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer First Transit, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 463 Commerce Park Drive, SE, Marietta, Georgia 30060	
3a. Employer Representative - Name and Title Joey McKelvey - General Manager		3b. Address (If same as 2b - state same) same	
3c. Tel. No. 770-429-7303	3d. Cell No.	3e. Fax No.	3f. E-Mail Address joey.mckelvey@firstgroup.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Contractor		4b. Principal product or service Transit	
5b. Description of Unit Involved Included: All full-time and part-time maintenance and fueler employees Excluded: Office clerical employees, professional employees, guards and supervisors as defined in the Act		5a. City and State where unit is located: Marietta, GA	
		6a. No. of Employees in Unit: 20	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? - Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). none		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No. 404-223-5122	10d. Cell No. 678-612-8011
		10e. Fax No.	10f. E-Mail Address bdunams@atu732.org

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11b. Election Date(s) NOV 14, 2018	11c. Election Time(s): 7am - 7pm	11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	11d. Election Location(s): 463 COMMERCE PARK CONFERENCE RM
12a. Full Name of Petitioner (including local name and number) Amalgamated Transit Union Local 732		12b. Address (street and number, city, state, and ZIP code) 501 Pulliam Street, Suite 406, Atlanta, GA 30312	

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

12d. Tel No. 404-223-5122	12e. Cell No. 678-612-8011	12f. Fax No.	12g. E-Mail Address bdunams@atu732.org
-------------------------------------	--------------------------------------	--------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Britt Dunams, Vice President		13b. Address (street and number, city, state, and ZIP code) 501 Pulliam Street, Suite 406, Atlanta, GA 30312	
13c. Tel No. 404-223-5122	13d. Cell No. 678-612-8011	13e. Fax No.	13f. E-Mail Address bdunams@atu732.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Britt Dunams	Signature Britt Dunams	Title Vice President	Date OCT 29, 2018
-------------------------------------	----------------------------------	--------------------------------	-----------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-231478

Date Filed

11/21/2018

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer
Republic Services
2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
2530 Business Dr
GA Cumming 30028-4393

3a. Employer Representative - Name and Title
Bobby Lynch
3b. Address (If same as 2b - state same)
2530 Business Dr
GA Cumming 30028-4393

3c. Tel. No.
(470) 302-0510
3d. Cell No.
3e. Fax No.
3f. E-Mail Address
BLYNCH@REPUBLICSERVICES.COM

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Waste Management Services
4b. Principal product or service
Waste Hauling
5a. City and State where unit is located:
Cumming, GA

5b. Description of Unit Involved
Included: See Attached Page 2 for additional details
Excluded: See Attached Page 2 for additional details
6a. No. of Employees in Unit:
37
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☐ **7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).**
☐ **7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.**

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).
8b. Address

8c. Tel No.
8d. Cell No.
8e. Fax No.
8f. E-Mail Address

8g. Affiliation, if any
8h. Date of Recognition or Certification
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ **If so, approximately how many employees are participating?** _____
(Name of labor organization) _____ **has picketed the Employer since (Month, Day, Year)** _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name
10b. Address
10c. Tel. No.
10d. Cell No.
10e. Fax No.
10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.
11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
12/21/18
11c. Election Time(s):
12am, 2am, 6am
11d. Election Location(s):
Employee break room

12a. Full Name of Petitioner (including local name and number)
Ben R Speight
Teamsters Local 728
12b. Address (street and number, city, state, and ZIP code)
2540 Lakewood Ave SW
GA Atlanta 30315-6328

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
INTERNATIONAL BROTHERHOOD OF TEAMSTERS

12d. Tel No.
(404) 622-0521
12e. Cell No.
(404) 604-6762
12f. Fax No.
(404) 627-2045
12g. E-Mail Address
bensp8@gmail.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title
13b. Address (street and number, city, state, and ZIP code)

13c. Tel No.
13d. Cell No.
13e. Fax No.
13f. E-Mail Address

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Ben R Speight
Signature
Ben Speight
Title
Organizing Director
Date
11/20/2018 19:22:20

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
10-RC-231478	11/21/2018

Employees Included

All full-time and regular part time drivers and helpers who report to the Cumming, GA facility

Employees Excluded

All other employees, dispatchers, guards, and supervisors as defined in the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No 10-RC-232612	Date Filed 12/12/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer AECOM		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) 49 GABRESKI DR., SHAW AFB, SOUTH CAROLINA 29152	
3a. Employer Representative - Name and Title WILLIAM SCOTT - SITE LEAD		3b. Address (If same as 2b - state same) 11832 ROCK LANDING DRIVE, NEWPORT NEWS, VA 23606	
3c. Tel. No. 803-406-4577	3d. Cell No.	3e. Fax No.	3d. E-Mail Address WILLIAM.SCOTT.51.CTR@US.AF.MIL
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SERVICE CONTRACT		4b. Principal product or service GOVERNMENT SERVICES	
		5a. City and State where unit is located: SHAW AFB - SOUTH CAROLINA	

5b. Description of Unit Involved
Included:
ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE: TECHNICIANS I, II, AND III.

6a. No. of Employees in Unit:
6
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Excluded:
OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.

Check One: ☐ 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about _____ (date) (if no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state). NONE		8b. Address N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A	

9. Is there now a strike or picketing at the Employer's establishment(s) involved? N/A If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) **NONE**

10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): JANUARY 4, 2019	11c. Election Time(s): 11:00 AM - 12:00 PM & 6:00 PM - 7:00 PM		
11d. Election Location(s): BREAK ROOM - 49 GABRESKI DRIVE, SHAW AFB, SOUTH CAROLINA			

12a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIO	12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011
---	--

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO

12d. Tel. No. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	12g. E-Mail Address
--------------------------------------	---------------	-------------------------------------	---------------------

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@IAMAW.ORG

I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.

Name (Print) JAMES R. LITTLE	Signature 	Title GRAND LODGE REPRESENTATIVE	DATE 12/12/2018
--	--	--	---------------------------

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.